

WHAT'S HAPPENING WEDNESDAY

Kansas Immunization Program

January 9, 2019

VFC Consultant On-Call

The Consultant On-Call can be reached
Monday—Friday, 8:00am—5:00pm at
785-296-5592.



CHIEF CHAT

Happy New Year and we hope that every one had a safe and enjoyable holiday season. As we roll into 2019, we also begin to see an increase in activity related to our immunization program. Please take note of several important announcements in this issue of What's Happening Wednesday.

First, it is time to begin meeting the 2019 annual training requirements for ALL Vaccines For Children (VFC) primary and backup coordinators. The Centers for Disease Control and Prevention (CDC) has released the updated You Call The Shots training modules. There are two CDC You Call the Shots modules that are required to be completed annually by the Kansas Immunization Program. The two modules are, *Storage and Handling* and *Vaccines for Children Program*. The primary and backup VFC coordinators are required to complete the modules yearly. We also encourage anyone who receives vaccine shipments or administers VFC vaccines to take the courses as well, as there is a lot of good information available. To begin, sign into the CDC Training and Continuing Education Online website at <https://tceols.cdc.gov/>.

To access these CDC modules, you can click the links below:

[CDC You Call the Shots – Module Ten – Storage and Handling 2019](#)

[CDC You Call the Shots – Module Sixteen – Vaccines for Children Program 2019](#)

Once you complete each course, you will need to complete and pass the post test. Once the tests are complete, please print and save your certificates. Note: You will be asked to upload the certificates during new and annual enrollments.

Second, please watch for a Special Alert in the coming days notifying you that your 2019—2020 Public Influenza Vaccine pre-book is to be submitted. We are waiting for CDC to notify us of the available vaccines under contract for next season before we can launch the flu pre-book. Our big challenge is that once CDC notifies us of the available product, we will have only three to four weeks to submit the state pre-book to CDC, so we will only be able to give you about two weeks to submit your pre-book to us. Please begin preparing now by reviewing your data from this season to use for projecting your needs for next season.



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Thanks to all of you who LIKE our page, we are over 600 "Likes." We appreciate all of your support and hard work vaccinating Kansans from vaccine preventable diseases! We can be found by clicking on the Facebook logo or link below. Please make sure and share our posts and like our page while you are there.

<https://www.facebook.com/ImmunizeKS/>



KSWebIZ

More Improvements to Serve You Better

We continue to make every effort to enhance KSWebIZ to better meet the needs of providers as well as to provide better data for the state immunization registry. This process is ongoing throughout the year as we plan and meet with the developer as well as the community of other state immunization registries who also use this product.

In 2018, we were able to deliver new and enhanced reports as well as other new features. We were able to eliminate bugs in the system that users helped to identify. We completed the first influenza vaccine pre-book in KSWebIZ last year. The HL7 onboarding process is now managed within KSWebIZ, further streamlining this process.

We are excited by the new enhancements and additional functionality being added in 2019. The first major change you will see happens the weekend of February 8 –10, 2019. KSWebIZ will be taken offline at 5:00 PM on Friday, February 8, 2019 and will be restored by 8:00 A.M on Monday, February 11, 2019. During this time, KSWebIZ will be moved from the Kansas Department of Health and Environment in-house servers to a new Cloud Service hosted by our developer. Along with this transition will be multiple new features added including the VFC enrollment module.

We will share many more details in the coming weeks, but wanted to give advance notice of the planned outage February 8 -10, 2019.

Vaccine Information Statement Current Publication Date			
Anthrax	3/21/18	Tdap	2/24/15
Chickenpox	2/12/18	MMRV	2/12/18
DTaP/DT/DTP	8/24/18	Multi-vaccine	11/05/15
Hepatitis A	7/20/16	PCV 13	11/05/15
Hepatitis B	10/12/18	PPSV	4/24/15
Hib	4/2/15	Polio	7/20/16
HPV	12/2/16	Rabies	10/6/09
Influenza (LAIV4)	8/07/15	Rotavirus	2/23/18
Influenza (IIV3 or IIV4)	8/07/15	Shingles	2/12/18
Japan. enceph.	1/24/14	Smallpox	10/01/09
MenACWY	8/24/18	Td	4/11/17
MenB	8/09/16	Typhoid	5/29/12
MMR	2/12/18	Yellow fever	3/30/11



INJECTION OF EDUCATION

Pneumonia vaccine recommendations can be confusing at times depending on the patient's age, previously received vaccines, and underlying medical conditions. The Advisory Committee on Immunization Practices (ACIP) immunization schedules are a great resource, but sometimes providers still have questions regarding which vaccine to give and when to give it. Do you give Prevnar 13® (Pneumococcal conjugate vaccine) or Pneumovax 23® (Pneumococcal polysaccharide vaccine)?

Great resources can be a clinician's best friend for finding vaccine related answers. The CDC has made available a mobile app, *PneumoRecs VaxAdvisor*. The app is very easy to use and is free to download. To begin, you enter the patient's date of birth, followed by previous vaccinations received, and risk factors or chronic medical conditions. The app will then recommend the appropriate pneumonia vaccine recommendation and any additional special instructions such as re-vaccination information. The app can be a quick and easy to use resource. You can find the information on the mobile app at: <https://www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html>.

The CDC also has a webpage devoted to pneumococcal vaccinations that summarizes who should receive the pneumococcal vaccines, which vaccine depending on age and specific medical conditions. This webpage can be found at: <https://www.cdc.gov/vaccines/vpd/pneumo/hcp/who-when-to-vaccinate.html>.

Of course, the CDC always has vaccine related pages specifically for health care providers; including recommendations, storage and handling, and vaccine administration. This health care provider specific webpage can be found at: <https://www.cdc.gov/vaccines/vpd/pneumo/hcp/index.html>.

Influenza Surveillance January 9, 2019



Forty Influenza-like Illness Surveillance Network (ILINet) sites in Kansas continue to monitor patients for influenza-like illness (ILI) – symptoms include a fever ($\geq 100^{\circ}\text{F}$) and the presence of a cough and/or sore throat. ILINet sites are also asked to submit up to five specimens for testing at the Kansas Health and Environmental Laboratories (KHEL). These specimens help monitor what types of influenza are present in Kansas. During the week ending January 5th, ILINet sites reported 3.0% of visits were due to ILI. There have been 12 positive influenza specimens, predominately A/H1, tested at KHEL. Any facility interested in participating in ILINet should contact Amie Cook at amie.cook@ks.gov or (785) 296-2898. Stay updated on influenza activity at <http://www.kdheks.gov/flu/surveillance.htm>.



VAX FACTS

Addressing Vaccine Refusal among Pregnant Women

The *Obstetrics & Gynecology* journal published [Obstetrician-Gynecologists' Strategies to Address Vaccine Refusal Among Pregnant Women](#), by S.T. O'Leary, et al., in its January issue. The abstract is reprinted below.

OBJECTIVE: To describe 1) obstetrician-gynecologists' (ob-gyns') perceptions of the frequency of vaccine refusal among pregnant patients and perceived reasons for refusal and 2) ob-gyns' strategies used when encountering vaccine refusal and perceived effectiveness of those strategies.

METHODS: We conducted an email and mail survey among a nationally representative network of ob-gyns from March 2016 to June 2016.

RESULTS: The response rate was 69% (331/477). Health care providers perceived that pregnant women more commonly refused influenza vaccine than tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis (Tdap) vaccine: 62% of respondents reported 10% or greater of pregnant women they care for in a typical month refused influenza vaccine compared with 32% reporting this for Tdap vaccine. The most commonly reported reasons for vaccine refusal were patients' belief that influenza vaccine makes them sick

(48%), belief they are unlikely to get a vaccine-preventable disease (38%), general worries about vaccines (32%), desire to maintain a natural pregnancy (31%), and concern that their child could develop autism as a result of maternal vaccination (25%). The most commonly reported strategies ob-gyns used to address refusal were stating that it is safe to receive vaccines in pregnancy (96%), explaining that not getting the vaccine puts the fetus or newborn at risk (90%), or that not getting the vaccine puts the pregnant woman's health at risk (84%). The strategy perceived as most effective was stating that not getting vaccinated puts the fetus or newborn at risk.

CONCLUSION: Ob-gyns perceive vaccine refusal among pregnant women as common and refusal of influenza vaccine as more common than refusal of Tdap vaccine. Emphasizing the risk of disease to the fetus or newborn may be an effective strategy to increase vaccine uptake.

Read the entire article: [Obstetrician-Gynecologists' Strategies to Address Vaccine Refusal Among Pregnant Women](#) (HTML format). A version in PDF format is downloadable through a link in the right column of the article's main page.

New Medscape CME/CE program titled "Preventing Meningococcal B Disease: Challenges and Opportunities" now online

On December 19, Medscape posted an online training program titled, [Preventing Meningococcal B Disease: Challenges and Opportunities](#). The presenters are Litjen Tan, PhD, MS, Immunization

Action Coalition; Gary S. Marshall, MD, University of Louisville School of Medicine; and Utibe Effiong, MD, MPH, MidMichigan Health System. The presentation's downloadable slides as well as information on obtaining continuing education credit are available once you sign in to the presentation.

Vaccine Redistribution

Please email any additions or changes to be made on the Vaccine Redistribution lists with subject matter "Redistribution" to kdhe.vaccine@ks.gov or call toll free at 1-877-296-0464 [Vaccine Redistribution information and lists](#).